BANNER & WITCOFF

JAN 1 1 2006

2 001/007



10 SOUTH WACKER DF IVE SUITE 3000 CHICAGO, ILLINOIS 600 06 TEL: (312) 463-5000 FAX: (312) 463-5001

www.bannerwitcof.com

FACSIMILE TRANSMITTAL SHEET					
TO:		FROM:			
1		Shawn P. Gorman			
COMPANY:		DATE:	:		
U.S.P.T.O.		January 11, 2006	!		
FAX NO.:		TOTAL NO. OF PAGES: (including cover she xt)			
(571) 273-8300		7			
YOUR REFERENCE NO.:		OUR REFERENCE (C/M) NO.:			
		005288.00021	!		
F E G C E	S. Application Serial No. 10/03 iled: December 21, 2001 ntitled: Cache On Demand roup Art Unit: 2157 onfirmation No.: 4505 xaminer: Emmanuel Coffy ttorney Ref. 005288.00021	37,297			
If you do not rec	eive all page(s) or have any pr	oblems receiving this transmission, please call	ı		
NAME:		PHONE:	i		
Mary Beth Carlson		(312) 463-5582			

Important/Confidential: This message is intended only for the use of the individual or entity to whom it is addressed. This message contains information from the law firm of Banner & Witcoff, Ltd. which may be privileged, confidential or exempt 1 om disclosure under applicable law. If the reader of this message is not the intended recipient, you are hereby notified that any disse nination, distribution, retention, archiving, or copying of the communication is strictly prohibited. If you have received this communication in error, please notify us immediately at our telephone number listed above. We will be happy to arrange for the return of this mes sage to lour offices at no cost to you.

**CHICAGO** 

**COMMENTS:** 

WASHINGTON, D.C.

BOSTON

PORTLAND, OR

Signature

Typed or printed name

Ø 002/007

JAN 1 1 2006 pt 3/58/21 (db-04)

Approved for use through 07/81/2006. DMB 065140631

U.S. Patent and Trademark Office: U.S. DEPARTMENT: IF COMMERCE

Under the Paperwork Radiuction Act of 1995, he persons are required to respond to a collection of information unless it displays a writed CtV 3 control number. 10/037,297 Application Number TRANSMITTAL Filing Date December 21, 2001 **FORM** First Named Inventor Tao Wu **Art Unit** 2157 Examiner Name **Emmanuel Coffy** (to be used for all correspondence after initial filing) Total Number of Pages in This Submission Attorney Docket Number 005288,00021 ENCLOSURES (check all that apply) 🔀 Fee Transmittal Form Drawing(s) After Allowance Communication to TC Appeal Communication to Board Fee Attached Licensing-related Papers of Appeals and Interfere ces Petition Appeal Communication to TC Amendment / Reply (Appeal Notice, Brief. Repl. Brief) Pelition to Convert to a After Final Proprietary Information Provisional Application Power of Attorney, Revocation Affidavits/declaration(s) Status Letter Change of Correspondence Address □ Terminal Disclaimer Other Enclosure(s) Extension of Time Request (please identify below, Request for Refund Fax Cover Sheet Express Abandonment Request CD, Number of CD(s) Information Disclosure Statement ☐ Landscape Table on CD Remarks The Commissioner is hereby authorized to charge any deficiencies Certified Copy of Priority Document(s) In payment or credit any overpayment to our Deposit Account 19-0733. Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Flm Banner & Witcoff, LTD. 43.805 Stanature Printed Name Shawn P. Gorman Reg. Date January 11, 2006 56.197 No. CERTIFICATE OF TRANSMISSION/MAILING hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

This collection of information is required by 97 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 12 minutes to or nights, including pathering, preparing, and submitting the completed application form to the USPTO. Time will very depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be set to the Chief Information Officer, U.S. Palent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED F XMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

augo

Mary Beth Carlson

Date

January 11, 2 108

BANNER & WITCOFF CENTRAL FAX CENTER

JAN 1 2006 through - 7/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office: U.S. DEP \RTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Effective on 12/08/2004,
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). Complete If Known FEE TRANSMITTAL Application Number 10/037,297 Filing Date December 21, 2001 for FY 2005 First Named Inventor Tao Wu Applicant claims small entity status. See 37 CFR 1.27 Examiner Name **Emmanuel Coffy** Art Unit 2157 (\$) 950 TOTAL AMOUNT OF PAYMENT 005288.00021 Attorney Docket No. METHOD OF PAYMENT (check all that apply) ☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify) : Deposit Account Name: Banner & Witcoff, LTD. ☑ Deposit Account Deposit Account Number: 19-0733 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) Indicated below Charge fee(s) indicated below, except for it a filling fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments Under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES SEARCH FEES EXAMINATION FEES Small Entity** Small Entity <u>Şmall Entity</u> Fee(\$) Fee s Paid (3) **Application Type** Fee (\$) Fee(\$) Fee(\$) Fee(\$) Fee(\$) Utility 300 150 200 500 250 100 Design 200 100 100 50 130 65 Plant 200 100 300 150 160 80 Reissue 300 150 500 250 600 300 **Provisional** 200 100 Ô 0 0 2. EXCESS CLAIM FEES Smal Entity: F. o.(\$) Fee Description Fee (\$) Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 200 00 Multiple dependent claims 360 80 Total Claims Multiple Deper dent Claims Extra Claims Foo Paid (\$) - 20 or HP= Fee (\$) Fee Paid (\$) HP = highest number of lotal claims paid for, if greater than 20. Indep. Claims Extra Claims Fee(\$) Fee Paid (\$) - 3 or HP= HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee f ald (\$) - 100 = \_\_ /50 = \_\_ (round up to a whole number) x 4. OTHER FEE(\$) Fees Pald (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Notice of Appeal fee 500 Extension of time fee (2-month) 450

SUBMITTED BY					
Signature	Clark Ametr 43805	Registration No. (Attorney/Agent)	56,197	Talephona	312-463-5000
Name (PrinVType)	Shawn P. Gorman			Date	Jar uary 11, 2006

This collection of information is required by 97 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to life (and by the USPTO to proce s) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the complete application form to the USPTO. Time will very depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing his burn in, should be sant to the Chief Information Officer, U.S. Patient and Tradement Office, U.S. Department, of Commence, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR C IMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1480, Alexandria, VA 22313-1450.

PAGE 3/7 \* RCVD AT 1/11/2006 5:45:30 PM [Eastern Standard Time] \* SVR:USPTO-EFXRF-6/24 \* DNIS:2738300 \* CSID:13124635001 \* DURATION (mm-ss):02-42